

**Hurricane Matthew DD 1610 Instructions.** Ensure you are using the DD 1610 dated May 2003

Applicable for: Civilians and their dependents; Military dependents

Soldiers will complete their authorizations / orders separately in DTS.

**\*Mileage reimbursement limited to 300 miles each way.**

**Per Diem and lodging based on actual safe haven location unless over 300 miles. If over 300 miles, reimbursement not to exceed the lesser of (1) locality rate or (2) max rate in 300 mile radius: Lodging \$140/day, Meals \$64/day, incidentals \$5/day.**

1. Put in the Date you are filling out the form.
2. Last name, First name, Middle Initial. This is of the civilian employee or eldest dependent if for military dependent(s)
3. Dependent SSN (should be the SSN of the individual named in block #2)
4. DEP for (Dependent) or CIV for Civilian Employee
5. Fort Stewart, Georgia
6. Put in your Organization i.e. 1BCT 3-69 AR
7. Phone # (Personal Cell or Home)
8. Put the word Evacuation in this block
9. Put the word Evacuation in this block
- 10a CIV for civilian employee and DEP for dependent
- 10b Put the date you began the evacuation/travel in this block. Cannot be earlier than 6 Oct.
11. Fill in the Departure location on the Top line i.e. Home address Fort Stewart, GA or Richmond Hill, GA depending on the location you departed from. For the 2<sup>nd</sup> Line fill in the location to where you evacuated your family i.e. Macon, Atlanta etc. On the 3<sup>rd</sup> line put your return to location AKA Home address.
12. Fill in the Transportation mode Other
13. Leave blank
14. Estimated Cost: Leave blank
15. Leave this block blank
16. Use the templated statement listed on the example DD 1610. For continuation sheet on the second page of the document list all dependents that travelled with you by name and Date of Birth. Sponsor needs to be identified and designated as either being civilian or military, and their SSN also must be listed in block 16
17. Needs to be signed by travel requesting official
18. Designated unit approver will sign this block.
19. Fill in the following accounting citation: 021 2020 20172017 202010D17 431398VHUR 21T0 A22FF 5049589333 40580394 021001
20. Fill in the information of the authorizing/order issuing official
21. Fill in the date issued/todays date.
22. Leave blank (Orders are required to have a travel authorization number G8 will fill in this number)
16. Continuation (For listing additional dependents.